Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Document Page 1 of 54

| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | rt 1: Identify Yourself | | | |
|-----|--|---|---|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Alesly First name A Middle name | First name Middle name | |
| | Bring your picture identification to your meeting with the trustee. | Martinez Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) | |
| 2. | All other names you have | ve | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-7478 | | |

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Document Page 2 of 54 Case number (if known)

Debtor 1 Alesly A Martinez

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|--|
| 1. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and | ■ I have not used any business name or EINs. Business name(s) | ☐ I have not used any business name or EINs. Business name(s) |
| | doing business as names | EINs | EINs |
| 5. | Where you live | E217 W Agotito Avo | If Debtor 2 lives at a different address: |
| | | 5317 W Agatite Ave Chicago, IL 60630 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Cook County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | Check one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Document Page 3 of 54

Case number (if known) Debtor 1 Alesly A Martinez

| ar | Tell the Court About | Your Ba | nkruptcy Ca | ase | | | |
|-----|---|--|---------------------------------|--|--|---|--------|
| 7. | The chapter of the Bankruptcy Code you are | | | | of each, see <i>Notice Required by</i> f page 1 and check the appropriat | 11 U.S.C. § 342(b) for Individuals Filing for Bankruptc e box. | y |
| | choosing to file under | ☐ Cha | apter 7 | | | | |
| | | ☐ Cha | apter 11 | | | | |
| | | ☐ Cha | apter 12 | | | | |
| | | ■ Cha | apter 13 | | | | |
| | | | • | | | | |
| 3. | How you will pay the fee | | about how yo | ou may pay. Typ attorney is subr | pically, if you are paying the fee yo | k with the clerk's office in your local court for more defourself, you may pay with cash, cashier's check, or moalf, your attorney may pay with a credit card or check | ney |
| | | ☐ I need to pay the fee in installments. If you choose this option, sign and attach the Applica The Filing Fee in Installments (Official Form 103A). | | | | on, sign and attach the Application for Individuals to Pa | ay |
| | | k | out is not req applies to yo | uired to, waive y ur family size ar | your fee, and may do so only if yond you are unable to pay the fee in | n only if you are filing for Chapter 7. By law, a judge mur income is less than 150% of the official poverty line installments). If you choose this option, you must fill | e that |
| | | t | the <i>Applicatio</i> | on to Have the C | Chapter 7 Filing Fee Waived (Offic | ial Form 103B) and file it with your petition. | |
| 9. | Have you filed for bankruptcy within the | ■ No. | | | | | |
| | last 8 years? | ☐ Yes | | | NA/Is a co | Occasional and | |
| | | | District | | When | Case number | |
| | | | District | | When | Case number | |
| | | | District | - | When | Case number | |
| 10. | Are any bankruptcy | ■ No | | | | | |
| | cases pending or being filed by a spouse who is not filing this case with | ☐ Yes | i. | | | | |
| | you, or by a business partner, or by an affiliate? | | | | | | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| 11. | Do you rent your residence? | ■ No. | Go to I | ine 12. | | | |
| | residence: | ☐ Yes | . Has yo | our landlord obta | ained an eviction judgment agains | t you and do you want to stay in your residence? | |
| | | | | No. Go to line | 12. | | |
| | | | | Yes. Fill out In | | Judgment Against You (Form 101A) and file it with this | S |
| | | | | | | | |

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main

Document Page 4 of 54 Case number (if known) Debtor 1 **Alesly A Martinez** Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any

property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Document Page 5 of 54

Debtor 1 Alesly A Martinez

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main

Document Page 6 of 54 Case number (if known) Debtor 1 **Alesly A Martinez** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Alesly A Martinez

Alesly A Martinez Signature of Debtor 1

Executed on June 7, 2017

MM / DD / YYYY

Signature of Debtor 2

MM / DD / YYYY

Executed on

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main

Debtor 1 Alesly A Martinez Document Page 7 of 54 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Ted A. Sm | ith | Date | June 7, 2017 |
|-----------------------|------------------|---------------|--------------------------|
| Signature of Att | orney for Debtor | | MM / DD / YYYY |
| Taul A. Ourith | | | |
| Ted A. Smith | | | |
| Printed name | | | |
| Smith Ortiz P | .C. | | |
| Firm name | | | |
| 4309 W. Fulle | erton Avenue | | |
| Chicago, IL 6 | 0639 | | |
| Number, Street, City, | State & ZIP Code | | |
| Contact phone 7 | 73-384-7400 | Email address | ted.smith@smithortiz.com |
| 6271456 | | | |
| Bar number & State | | | |

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main

| | use 17 17050 1 | Docume | | Desc Main |
|------------------------|--------------------------|-------------------|-------------|-----------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Alesly A Martinez | 2 | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| Off: =: = 1 L= | 1000 | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your as Value o | ssets of what you own |
|-----|--|--------------------|-------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 5,280.65 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 5,280.65 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 6,003.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 26,951.29 |
| | Your total liabilities | \$ | 32,954.29 |
| Pai | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,948.09 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 1,852.00 |
| Pai | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other sch | nedules. |
| | ■ Yes What kind of debt do you have? | | |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Desc Main Entered 06/09/17 11:37:15 Case 17-17656 Doc 1 Filed 06/09/17 Document

Page 9 of 54 Case number (if known) Debtor 1 Alesly A Martinez

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
| | 122A-1 Line 11: OR . Form 122B Line 11: OR . Form 122C-1 Line 14. |

2,673.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total cla | ıim |
|--|-----------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main

| | | | Document | Page 10 of 54 | | | |
|-----------------|-----------------------|---------------------------|--|-----------------------------------|---|----------|------------------------------------|
| Fill in | this inform | nation to identify your | case and this filing: | | | | |
| Debto | or 1 | Alesly A Martine | z | | | | |
| | | First Name | Middle Name | Last Name | | | |
| Debto (Spous | or 2 e, if filing) | First Name | Middle Name | Last Name | | | |
| Unite | d States Bar | kruptcy Court for the: | NORTHERN DISTRICT OF | ILLINOIS | | | |
| Case | number | | | | | | Check if this is an |
| | | | | | | | amended filing |
| | | | | | | | |
| Offi | cial For | m 106A/B | | | | | |
| ScI | hedule | A/B: Prop | ertv | | | | 12/15 |
| | | | pe items. List an asset only once | . If an asset fits in more than o | ne category, list the asse | t in the | category where you |
| inform | | space is needed, attach | ate as possible. If two married po a separate sheet to this form. C | | | | |
| Part 1 | : Describe E | Each Residence, Buildin | g, Land, or Other Real Estate Yo | u Own or Have an Interest In | | | |
| 1. Do y | you own or h | ave any legal or equitabl | e interest in any residence, build | ding, land, or similar property? | | | |
| | No. Go to Part | 2. | | | | | |
| | es. Where is | the property? | | | | | |
| Part 2 | Describe V | our Vehicles | | | | | |
| T dit 2 | Describe | our vernoies | | | | | |
| | | | uitable interest in any vehicle | | | y vehicl | es you own that |
| somec | ne eise anv | es. Il you lease a verilo | le, also report it on Schedule (| 3. Executory Contracts and O | nexpired Leases. | | |
| 3. Ca | rs, vans, tru | cks, tractors, sport u | tility vehicles, motorcycles | | | | |
| | No | | | | | | |
| _ | | | | | | | |
| | res | | | | | | |
| 3.1 | Make: F | londa | Who has an interest | in the property? Check one | Do not deduct secure | d claims | or exemptions. Put |
| 3.1 | | Accord | Debtor 1 only | in the property? Check one | the amount of any sec Creditors Who Have (| | |
| | - IVIOGCI. | 003 | Debtor 2 only | | | | |
| | Approximate | | Debtor 1 and Debtor | or 2 only | Current value of the entire property? | | rrent value of the ortion you own? |
| 1 | Other inform | | At least one of the | • | | • | • |
| | | | Check if this is co | ommunity property | \$4,350.00 | <u> </u> | \$4,350.00 |
| | | | | | | | |
| 4. Wa | tercraft, air | craft. motor homes. A | TVs and other recreational | vehicles, other vehicles, and | d accessories | | |
| | | | onal watercraft, fishing vessels | | | | |
| | | | | | | | |
| I | | | | | | | |
| | Yes | | | | | | |
| | | | | | | | |
| - A- | ما دام ما داما | rvalue of the montion | vou own for all of vour ontri | oo from Dort 2. including on | v antrias for | | |
| | | | you own for all of your entrice | | | | \$4,350.00 |
| | _ , | | | | _ | | |
| | | our Personal and Hous | | | | | |
| Do yo | ou own or h | ave any legal or equi | able interest in any of the fo | llowing items? | | | ent value of the ion you own? |
| | | | | | | | ot deduct secured |
| | | | | | | clain | ns or exemptions. |

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Schedule A/B: Property

Official Form 106A/B

Case 17-17656

Doc 1

Filed 06/09/17

Entered 06/09/17 11:37:15

Desc Main

| Debtor 1 Alesly | y A Martinez | Document Page 12 | Case number (if known) | |
|---|---|---|--|----------------------|
| ■ Yes | | | | |
| | | | Cash | \$65.0 |
| | ecking, savings, or other financial itutions. If you have multiple accordance | accounts; certificates of deposit; share ounts with the same institution, list each | res in credit unions, brokerage houses, a ch. | and other similar |
| | 17.1. Checking | Chase Bank | | \$315.6 |
| | funds, or publicly traded stoc | | | |
| Examples: Bon ■ No □ Yes | | th brokerage firms, money market acc suer name: | counts | |
| 19. Non-publicly tr joint venture | raded stock and interests in inc | corporated and unincorporated bus | sinesses, including an interest in an L | .LC, partnership, an |
| ■ No □ Yes. Give spo | ecific information about them Name of entity: | | % of ownership: | |
| Negotiable inst Non-negotiable ■ No | truments include personal checks e instruments are those you cann | negotiable and non-negotiable instr s, cashiers' checks, promissory notes, ot transfer to someone by signing or c | and money orders. | |
| ☐ Yes. Give spe | ecific information about them Issuer name: | | | |
| 21. Retirement or p Examples: Intel | | (k), 403(b), thrift savings accounts, or | other pension or profit-sharing plans | |
| ☐ Yes. List each | n account separately. Type of account: | Institution name: | | |
| Your share of a | | de so that you may continue service o rent, public utilities (electric, gas, wate | or use from a company er), telecommunications companies, or o | thers |
| ☐ Yes | | Institution name or individ | lual: | |
| 23. Annuities (A co | ontract for a periodic payment of | money to you, either for life or for a nu | umber of years) | |
| ☐ Yes | Issuer name and description | on. | | |
| | education IRA, in an account in 0(b)(1), 529A(b), and 529(b)(1). | າ a qualified ABLE program, or und | er a qualified state tuition program. | |
| Yes | Institution name and descr | ription. Separately file the records of a | iny interests.11 U.S.C. § 521(c): | |
| ■ No | | ty (other than anything listed in line | e 1), and rights or powers exercisable | e for your benefit |
| ☐ Yes. Give spe | ecific information about them | | | |
| | | ts, and other intellectual property roceeds from royalties and licensing a | greements | |

Official Form 106A/B Schedule A/B: Property page 3

 $\hfill \square$ Yes. Give specific information about them...

| | | Case | 17-17656 | Doc 1 | | | Desc Main |
|----|--------------|--------------------------------|---|----------------------------------|---|---|---|
| D | ebtor 1 | Alesly | A Martinez | | Document | Page 13 of 54 Case number (if known) | |
| 27 | Exar ■ No | <i>mples:</i> Buildi | nises, and other ing permits, excluding permits, excluding the control of the con | usive licenses | ngibles , cooperative association | n holdings, liquor licenses, professional licens | es |
| M | oney o | or property o | owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28 | ■ No | | • | bout them, inc | cluding whether you alre | ady filed the returns and the tax years | |
| 29 | Exar ■ No | | due or lump sum | | usal support, child suppo | ort, maintenance, divorce settlement, property | settlement |
| 30 | Exar | <i>mples:</i> Unpa bene | someone owes id wages, disabi fits; unpaid loans cific information | ity insurance s you made to | | efits, sick pay, vacation pay, workers' compe | nsation, Social Security |
| 31 | Exar ■ No | <i>mples:</i> Healtl | insurance comp | | nealth savings account (| HSA); credit, homeowner's, or renter's insurar Beneficiary: | nce Surrender or refund value: |
| 32 | If you some | u are the bei eone has die | neficiary of a livir | ng trust, exped | someone who has die ct proceeds from a life in | ed surance policy, or are currently entitled to reco | eive property because |
| 33 | Exar ■ No | mples: Accid | | nt disputes, in | you have filed a lawsu surance claims, or rights | it or made a demand for payment s to sue | |
| 34 | ■ No | _ | t and unliquida | | every nature, includin | g counterclaims of the debtor and rights to | set off claims |
| 35 | ■ No | | sets you did no | | | | |
| 36 | | | | | om Part 4, including a | ny entries for pages you have attached | \$380.65 |
| Pa | art 5: [| Describe Any | Business-Related | d Property You | Own or Have an Interest | In. List any real estate in Part 1. | |
| | ■ No. (| u own or have Go to Part 6. | | itable interest | in any business-related p | roperty? | |

Official Form 106A/B Schedule A/B: Property page 4

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Page 14 of 54

Case number (if known) Document Debtor 1 **Alesly A Martinez** Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$4.350.00 57. Part 3: Total personal and household items, line 15 \$550.00 Part 4: Total financial assets, line 36 \$380.65 58. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 60. Part 7: Total other property not listed, line 54 \$0.00 61.

\$5,280.65

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$5,280.65

\$5,280.65

| | Cas | se 17-17030 D | | | Page 15 of 54 | 7.15 Desc Main | | | | | |
|--|--|--|--|--|---|---|--|--|--|--|--|
| Fil | I in this inform | ation to identify your c | | | 70E 13 01 34 | | | | | | |
| De | ebtor 1 | Alesly A Martinez | | | | | | | | | |
| Do | ebtor 2 | First Name | Middle Name | L | ast Name | | | | | | |
| | ouse if, filing) | First Name | Middle Name | L | ast Name | | | | | | |
| Ur | nited States Ban | kruptcy Court for the: | NORTHERN DISTRICT | OF ILLIN | OIS | | | | | | |
| Ca | ase number | | | | | | | | | | |
| (if k | known) | | | | | ☐ Check if this is an amended filing | | | | | |
| | fficial For | | | | | | | | | | |
| S | chedule | C: The Pro | perty You (| Claim | as Exempt | 4/16 | | | | | |
| the nee cas For spe any fun exe | property you liseded, fill out and the number (if known each item of pecific dollar amy applicable stands—may be unemption to a pa | ted on Schedule A/B: Property you claim as e count as exempt. Alternatutory limit. Some exemptimited in dollar amount. | coperty (Official Form 106 pany copies of Part 2: Accept, you must speciatively, you may claim mptions—such as thoset. However, if you claim | SA/B) as you diditional Parties the full failing the full failing man exem | our source, list the property that you age as necessary. On the top of any ount of the exemption you claim. It market value of the property be th aids, rights to receive certain I option of 100% of fair market value. | or supplying correct information. Using a claim as exempt. If more space is additional pages, write your name and One way of doing so is to state a sing exempted up to the amount of penefits, and tax-exempt retirement use under a law that limits the it, your exemption would be limited | | | | | |
| | | the Property You Clain | m as Exempt | | | | | | | | |
| 1. | Which set of | exemptions are you cla | iming? Check one only | , even if yo | our spouse is filing with you. | | | | | | |
| | You are cla | iming state and federal r | nonbankruptcy exemption | ns. 11 U.S | S.C. § 522(b)(3) | | | | | | |
| | ☐ You are cla | iming federal exemptions | s. 11 U.S.C. § 522(b)(2 |) | | | | | | | |
| 2. | For any prope | For any property you list on <i>Schedule A/B</i> that you claim as exempt, fill in the information below. | | | | | | | | | |
| | | on of the property and line hat lists this property | on Current value of portion you own | the Am | Specific laws that allow exemption | | | | | | |
| | Concadio 702 | nat note tine property | Copy the value from Schedule A/B | om Che | eck only one box for each exemption. | | | | | | |
| | | ured, Beroom set, T | Able, \$250. | .00 | \$250.00 | 735 ILCS 5/12-1001(b) | | | | | |
| | microwave Line from Scho | e seat, coffee table, edule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | |
| | | day clothes and sho | es \$300. | .00 | \$300.00 | 735 ILCS 5/12-1001(b) | | | | | |
| | Line from Sch | edule A/B: 11.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | |
| | Cash | | \$65. | 00 ■ | \$65.00 | 735 ILCS 5/12-1001(b) | | | | | |
| | Line from Sch | edule A/B: 16.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | |
| | Checking: C | | \$315. | 65 ■ | \$315.65 | 735 ILCS 5/12-1001(b) | | | | | |
| | Line from Sch | edule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | |
| 3. | Are you claim | ning a homestead exem | option of more than \$16 | 50,375? | | | | | | | |

| (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustm | sumeni. |
|--|---------|
|--|---------|

Official Form 106C

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Case 17-17656 Page 16 of 54 Case number (if known) Document

Debtor 1 Alesly A Martinez

| Schedule D: Creditors Who Have Claims Secured by Property Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). I. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Column B Value of collateral Value of collateral |
|--|
| First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more s needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Value of collateral Value of collateral |
| First Name |
| (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecure |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (If known) Check if this is an amended filling Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecure |
| Case number (if known) Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Value of collateral |
| Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral |
| Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecure |
| Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral |
| Schedule D: Creditors Who Have Claims Secured by Property Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Column B Value of collateral Value of collateral |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral |
| is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? \[\begin{array}{c} \text{No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. \] \[\text{Yes. Fill in all of the information below.} \] Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim \end{array} \] Column B Value of collateral Unsecured Unsecured Value of collateral |
| □ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. □ Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Column A Amount of claim Value of collateral Value of collateral Value of collateral |
| Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Column A Amount of claim Value of collateral Unsecure |
| Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Column A Amount of claim Value of collateral Unsecure |
| 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Column A Amount of claim Value of collateral Unsecure |
| 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecure |
| |
| much as possible, list the claims in alphabetical order according to the creditor's name. Do not deduct the value of collateral. that supports this portion If any |
| 2.1 OneMain Describe the property that secures the claim: \$6,003.00 \$0.00 \$6,0 |
| Creditor's Name Secured |
| Attn: Bankruptcy |
| As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that |
| Evansville, IN 47708 Contingent |
| Number, Street, City, State & Zip Code Unliquidated |
| ☐ Disputed |
| Who owes the debt? Check one. Nature of lien. Check all that apply. □ Debtor 1 only □ An agreement you made (such as mortgage or secured |
| car (nan) |
| □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) |
| ☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit |
| ☐ Check if this claim relates to a ☐ Other (including a right to offset) |
| community debt |
| Opened |
| 03/16 Last |
| |
| Active Date debt was incurred 4/28/17 Last 4 digits of account number 7578 |

\$6,003.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. \$6,003.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main

| | 0436 17 17000 | Document | Page 18 | 3 of 54 | Descrivani |
|-------------------------------|--|---|------------------------------------|---|---|
| Fill in | this information to identify you | | | | |
| Debto | r 1 Alesly A Martine | ?Z | | | |
| | First Name | Middle Name | Last Name | | |
| Debto | r 2 e if, filing) First Name | Middle Name | Last Name | | |
| | - | | | | |
| United | d States Bankruptcy Court for the: | NORTHERN DISTRICT OF IL | LINOIS | | |
| | number | | | | _ 0 |
| (if know | n) | | | | ☐ Check if this is an amended filing |
| | | | | | g |
| | ial Form 106E/F | | | | |
| <u>Sch</u> | edule E/F: Creditors \ | Who Have Unsecured | Claims | | 12/15 |
| Schedu Schedu left. Att | Ile G: Executory Contracts and Unex Ile D: Creditors Who Have Claims So ach the Continuation Page to this pand case number (if known). | es that could result in a claim. Also I kpired Leases (Official Form 106G). I scured by Property. If more space is age. If you have no information to re | Do not include a needed, copy t | any creditors with partially secured he Part you need, fill it out, number | claims that are listed in the entries in the boxes on the |
| Part 1 | | | | | |
| _ | o any creditors have priority unsecu | red claims against you? | | | |
| | No. Go to Part 2. | | | | |
| Part 2 | Yes. | ITV Uncessured Claims | | | |
| | List All of Your NONPRIOR o any creditors have nonpriority uns | | | | |
| _ | | | | 11. | |
| | | part. Submit this form to the court with | your other sche | dules. | |
| | Yes. | | | | |
| un tha | secured claim, list the creditor separat | claims in the alphabetical order of the ely for each claim. For each claim listed, list the other creditors in Part 3.If you | d, identify what ty | ype of claim it is. Do not list claims alre | eady included in Part 1. If more |
| | | | | | Total claim |
| 4.1 | Ameri Cash | Last 4 digits of acc | ount number | 7478 | \$1,200.00 |
| | Nonpriority Creditor's Name 4815 W Irving Park Rd | When was the deb | t incurred? | | |
| | Chicago, IL 60641 | | | | |
| | Number Street City State Zlp Code | · · · · · · · · · · · · · · · · · · · | file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check on | | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Unliquidated☐ Disputed | | | |
| | ☐ At least one of the debtors and a | l claim: | | | |
| | ☐ Check if this claim is for a cor | | | | |
| | debt | • | ng out of a sepa | ration agreement or divorce that you d | lid not |
| | Is the claim subject to offset? | report as priority cla | ims | | |
| | No | • | - | g plans, and other similar debts | |
| | Yes | Other. Specify | Personal Lo | oan | |
| | | | | | |

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Document Page 19 of 54

Debtor 1 Alesly A Martinez Case number (if know) 4.2 \$1,266.39 AT & T Last 4 digits of account number 2382 Nonpriority Creditor's Name PO Box 8100 When was the debt incurred? Aurora, IL 60507-8100 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Utility 4.3 **Capital One** Last 4 digits of account number 7645 \$537.00 Nonpriority Creditor's Name Attn: Bankruptcv Opened 10/14 Last Active Po Box 30253 When was the debt incurred? 5/08/17 Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.4 **Comenity Bank/Carsons** Last 4 digits of account number 2462 \$5,549.00 Nonpriority Creditor's Name Opened 09/14 Last Active Po Box 182125 When was the debt incurred? 05/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main

Page 20 of 54 Document Debtor 1 Alesly A Martinez Case number (if know) 4.5 \$4,578.00 Comenity Bank/Harlem Furniture Last 4 digits of account number 6595 Nonpriority Creditor's Name Opened 10/29/14 Last Active Po Box 182125 When was the debt incurred? 05/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.6 Comenity Bank/nwyrk&co Last 4 digits of account number 3754 \$2,307.00 Nonpriority Creditor's Name Opened 12/12 Last Active 220 W Schrock Rd When was the debt incurred? 05/17 Westerville, OH 43081 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.7 Comenity Bank/Victoria Secret Last 4 digits of account number 7283 \$1.557.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 09/14 Last Active Po Box 182125 When was the debt incurred? 05/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

report as priority claims

■ Other. Specify Charge Account

 \square Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Document Page 21 of 54 Case number (if know)

| Debu | Alesiy A Martinez | | Case number (if know) | |
|----------|---|-------------------------------------|--|------------|
| 4.8 | Con Fin Svc | Last 4 digits of account number | 1101 | \$668.00 |
| | Nonpriority Creditor's Name 3849 N Cicero Ave Chicago, IL 60641 | When was the debt incurred? | Opened 8/03/16 Last Active 3/31/17 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | a plane, and other similar debte | |
| | ■ No | ☐ Debts to pension or profit-sharin | | |
| | Yes | Other. Specify Auto | Goods And Other Collateral | |
| 4.9 | Famsa Inc | Last 4 digits of account number | 1904 | \$1,801.00 |
| | Nonpriority Creditor's Name 2727 Lyndon B Johnson Fwy Dallas, TX 75234 | When was the debt incurred? | Opened 03/17 Last Active 4/26/17 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | | |
| | Yes | Other. Specify Installment | | |
| 4.1 0 | Mira Med Revenue | Last 4 digits of account number | 0797 | \$654.00 |
| | Nonpriority Creditor's Name P.O. Box 77000 Dept. 77304 | When was the debt incurred? | | |
| | Detroit, MI 48277 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | \square Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | □ Yes | Other. Specify Medical | | |

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Document Page 22 of 54

Case number (if know)

| Alesiy A Martinez | | Case number (if know) | | | | |
|---|--|---|----------|--|--|--|
| National Quik Cash | Last 4 digits of account number | 7478 | \$800.00 | | | |
| Nonpriority Creditor's Name 4820 W Irivng Park Rd Chicago, IL 60641 | When was the debt incurred? | | | | | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | | |
| Who incurred the debt? Check one. | | | | | | |
| ■ Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | |
| \square Check if this claim is for a community | Student loans | | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | | | |
| Yes | Other. Specify Personal L | oan | | | | |
| North Shore Agency | Last 4 digits of account number | 0001 | \$585.90 | | | |
| Nonpriority Creditor's Name 270 Spagnoli Road | When was the debt incurred? | | | | | |
| Suite 110 | | | | | | |
| Melville, NY 11747 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | | | |
| Who incurred the debt? Check one. | | | | | | |
| ■ Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | |
| ☐ Check if this claim is for a community | Student loans | | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | | | | |
| No | Debts to pension or profit-sharing | | | | | |
| Yes | Other. Specify Utility | | | | | |
| Oportun | Last 4 digits of account number | 7972 | \$768.00 | | | |
| Nonpriority Creditor's Name | | | | | | |
| 1600 Seaport Blvd Ste 250 | When was the debt incurred? | Opened 4/05/16 Last Active 4/14/17 | | | | |
| Redwood City, CA 94063 | When was the dept incurred: | 7/17/17 | | | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | | | |
| Who incurred the debt? Check one. | | | | | | |
| ■ Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecure | | | | | |
| ☐ Check if this claim is for a community | | ☐ Student loans | | | | |
| debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | | | | |
| ■ No | ☐ Debts to pension or profit-sharing | ng plans, and other similar debts | | | | |
| Yes | ■ Other. Specify Unsecured | | | | | |
| | | | | | | |

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Document Page 23 of 54

Debtor 1 Alesly A Martinez Case number (if know) 4.1 \$1,600.00 **Opportunity Financia** 1913 Last 4 digits of account number 4 Nonpriority Creditor's Name Opened 4/27/17 Last Active 11 E. Adams When was the debt incurred? 5/05/17 Chicago, IL 60603 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Unsecured 4.1 SEIU 0267 \$920.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 111 E Wacker Drive Chicago, IL 60601 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify 4.1 Synchrony Bank 1806 \$197.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Bankruptcy Opened 09/15 Last Active Po Box 956060 When was the debt incurred? 05/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Document Page 24 of 54
Case number (if know)

| CDI | Alesiy A Wartifiez | | - Case Humber (II know) | |
|-----|---|--|---|----------|
| 1 | Synchrony Bank/ JC Penneys | Last 4 digits of account number | 6239 | \$422.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 956060 Orlando, El 23806 | When was the debt incurred? | Opened 11/14 Last Active 5/21/17 | |
| | Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Charge Acc | count | |
| | Target | Last 4 digits of account number | 5230 | \$237.00 |
| | Nonpriority Creditor's Name C/O Financial & Retail Srvs | | Opened 11/14 Last Active | |
| | Mailstopn BT POB 9475 Minneapolis, MN 55440 | When was the debt incurred? | 5/14/17 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| | Turner Acceptance Crp Nonpriority Creditor's Name | Last 4 digits of account number | 1507 | \$769.00 |
| | 5900 W Howard St Skokie, IL 60077 | When was the debt incurred? | Opened 06/16 Last Active 4/29/17 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | Obligations arising out of a sepa | | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | | |
| | ☐ Yes | ■ Other Specify Unsecured | | |

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main

Page 25 of 54 Document Case number (if know) Debtor 1 Alesly A Martinez 4.2 **Verizon Wireless** 7478 \$535.00 Last 4 digits of account number 0 Nonpriority Creditor's Name P.O. Box 25505 When was the debt incurred? Lehigh Valley, PA 18002 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify utitliy Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Mira Med Revenue Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 77000 Part 2: Creditors with Nonpriority Unsecured Claims Dept. 77304 Detroit, MI 48277 Last 4 digits of account number 4310 Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim**

| Total | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
|-----------------------|-------------------|---|-------------------|----------------|----------------------|
| claims from Part 1 | 6b. 6c. 6d. | Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Add all other priority unsecured claims. Write that amount here. | 6b. 6c. 6d. | \$ \$ \$ | 0.00 0.00 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| Total claims | 6f. | Student loans | 6f. | \$T | otal Claim 0.00 |
| from Part 2 | 6g. 6h. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | 6g. 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 26,951.29 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 26,951.29 |

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main

| | | 12(1) | $\frac{3}{1}$ | | | | |
|---------------------|---|-------------------|---------------|--|--|--|--|
| Fill in this infor | Fill in this information to identify your case: | | | | | | |
| Debtor 1 | Alesly A Martinez | 2 | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | | | |
| Case number | | | | | | | |
| (ii kilowii) | | | | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | r company with Name, Number | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------------------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| 0 | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | J., | | State | | |

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main

| | | Docume | ent Page 27 d |) <u>r 54 </u> | |
|--|---|---|--|---|--|
| Fill in this i | nformation to identify your | | | | |
| Debtor 1 | Alesly A Martinez | , | | | |
| 20010. | First Name | Middle Name | Last Name | | |
| Debtor 2 | F: (N | A | | | |
| (Spouse if, filing |) First Name | Middle Name | Last Name | | |
| United State | es Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case numbe | ar | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Official | Form 10011 | | | | |
| | Form 106H | • . | | | |
| Schedu | ule H: Your Cod | ebtors | | | 12/15 |
| ■ No □ Yes 2. Withi Arizona, ■ No. G □ Yes. 3. In Columin line 2 | , California, Idaho, Louisiana, Go to line 3. Did your spouse, former spou mn 1, list all of your codebt 2 again as a codebtor only i | I lived in a community pr Nevada, New Mexico, Pu use, or legal equivalent live ors. Do not include your f that person is a guaran | operty state or territor erto Rico, Texas, Wash with you at the time? spouse as a codebtor tor or cosigner. Make | ry? (Community propert ington, and Wisconsin.) r if your spouse is filin sure you have listed th | g with you. List the person shown he creditor on Schedule D (Official |
| out Col | | Form 106E/F), or Sched | ule G (Official Form 10 | | Schedule E/F, or Schedule G to fill |
| | olumn 1: Your codebtor Ime, Number, Street, City, State and ZI | P Code | | Column 2: The cre Check all schedule | editor to whom you owe the debt |
| | | | | | , |
| 3.1 | ame | | | Schedule D, lin | |
| 140 | ame | | | ☐ Schedule E/F, | |
| | | | | ☐ Schedule G, lin | ie |
| Nı Ci | umber Street | State | ZIP Code | | |
| | · | | | | |
| | | | | | |
| 3.2 Na | ame | | | Schedule D, lin | |
| | | | | ☐ Schedule E/F, I | |
| | 6: | | | — Scriedule G, IIII | |
| Nı Ci | umber Street ty | State | ZIP Code | | |
| | • | | | | |

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Document Page 28 of 54

| Fill | in this information to identify yo | our case: | | | | | | | | |
|---------------------|--|---|--|-----------------------|-----------------|-----------------------|-----------------------|-------------------------|------------------------------------|-----------------|
| Del | otor 1 Alesly A | Martinez | | | _ | | | | | |
| | otor 2 ouse, if filing) | | | | _ | | | | | |
| Uni | ted States Bankruptcy Court fo | r the: NORTHERN DISTRI | CT OF ILLINOIS | | | | | | | |
| | se number nown) | | - | | | □ Ar | | ed filing ent showi | ng postpetition following date: | chapter |
| 0 | fficial Form 106l | | | | | MI | M / DD/ Y | YYY | | |
| S | chedule I: Your I | ncome | | | | | | | | 12/15 |
| sup spo atta | as complete and accurate as plying correct information. If use. If you are separated and ch a separate sheet to this for the control of the c | you are married and not fili your spouse is not filing w rm. On the top of any additi | ng jointly, and your s ith you, do not includ | spouse i de infori | s livi natio | ng with y on about | you, incl your spo | ude infor ouse. If m | mation about nore space is | your needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | | Debtor 2 | or non- | filing spouse | |
| | If you have more than one job, attach a separate page with information about additional | o, Employment status | ■ Employed | | | | ☐ Emplo | oyed | | |
| | | Employment status | ☐ Not employed | | | | ☐ Not employed | | | |
| | employers. | Occupation | Cleaning | | | | | | | |
| | Include part-time, seasonal, of self-employed work. | Employer's name | Vargas Group | | | | | | | |
| | Occupation may include stud or homemaker, if it applies. | ent Employer's address | 53 W Jackson Suite 1310 Chicago, IL 6060 | 04 | | | | | | |
| | | How long employed t | here? 1year | | | | _ | | | |
| Par | t 2: Give Details About | Monthly Income | | | | | | | | |
| Esti spou | mate monthly income as of the use unless you are separated. The user user is a contract of the u | he date you file this form. If | , | | Í | · | hat perso | on on the | lines below. If y | Ū |
| 2 | List monthly gross wages, | | | 2 | œ. | 2 | 673.45 | | ling spouse | |
| 2. | deductions). If not paid mont | • | ly wage would be. | 2. | \$ | ۷,۰ | | \$ | | |
| 3. | Estimate and list monthly of | vertime pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. A | dd line 2 + line 3. | | 4. | \$ | 2,67 | 3.45 | \$ | N/A | |

Official Form 106I Schedule I: Your Income page 1

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Document Page 29 of 54

| Deb | tor 1 | Alesly A Martinez | - | С | ase | number (if known) | | | | |
|-----|---------------------------------|---|----------|----|---------|-------------------|-----------|----------------------|----------------|------------------|
| | | | | | | Debtor 1 | non | Debtor n-filing s | pouse | |
| | Cop | by line 4 here | 4. | | \$_ | 2,673.45 | \$_ | | N/A | <u> </u> |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a | | \$ | 638.69 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b | | \$ | 0.00 | \$ | | N/A | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c | | \$ | 0.00 | \$ | | N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 5d | | \$ | 0.00 | \$ | | N/A | <u> </u> |
| | 5e. | Insurance | 5e | | \$ | 0.00 | \$ | | N/A | 1 |
| | 5f. | Domestic support obligations | 5f. | | \$_ | 0.00 | \$_ | | N/A | _ |
| | 5g. | Union dues | 5g | | \$ | 86.67 | \$_ | | N/A | |
| | 5h. | Other deductions. Specify: | 5h | .+ | \$ | 0.00 | + \$_ | | N/A | <u>\</u> |
| 6. | | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | _ | 725.36 | \$_ | | N/A | _ |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | , | § | 1,948.09 | \$_ | | N/A | <u> </u> |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a | | \$ | 0.00 | \$ | | N/A | |
| | 8b. | Interest and dividends | 8b | | \$_ | 0.00 | \$_ | | N/A | <u> </u> |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c | | \$ | 0.00 | \$ | | N/A | |
| | 8d. | Unemployment compensation | 8d | | \$ | 0.00 | \$ | | N/A | _ |
| | 8e. | Social Security | 8e | | \$ | 0.00 | \$ | | N/A | 1 |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | 8f. | | \$ | 0.00 | \$_ \$ | | N/A | |
| | 8g. 8h. | Other monthly income. Specify: | 8g 8h | | ֆ \$ | 0.00 | | | N/A N/A | _ |
| | OII. | Other monthly income. Specify. | _ 011 | .т | Ψ | 0.00 | ΤΨ_ | | IN/A | <u></u> |
| 9. | Add | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | | 0.00 | \$_ | | N/ | A |
| 10 | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 1,948.09 + \$ | | N/A | = \$ | 1,948.09 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | Ψ_ | | 1,340.03 | | 14/7 | | 1,340.03 |
| 11. | State Included the other Double | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify: | depe | | | • | | | e J. +\$ | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certainlies | | | | | | . 12. | \$ | 1,948.09 |
| 13. | Do : | you expect an increase or decrease within the year after you file this form No. | ? | | | | | | Combi month | ned ly income |
| | | No. | | | | | | | | 1 |

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Document Page 30 of 54

| Fills | in this informe | ition to identify yo | our caso: | | | | | | |
|-------------|----------------------------|---------------------------------------|----------------|---|---|---------------------|------------------------------------|-------------------------------|----------|
| | | | | | | Char | k if this is: | | |
| Deb | Debtor 1 Alesly A Martinez | | | | | | K if this is: An amended filing | | |
| | tor 2 | | | | | | A supplement show | ving postpetition chapter | |
| (Spc | ouse, if filing) | | | | | | 13 expenses as of | the following date: | |
| Unite | ed States Bankr | ruptcy Court for the | : NORTH | ERN DISTRICT OF ILLIN | OIS | _ | MM / DD / YYYY | | |
| l | e number nown) | | | | | | | | |
| | | rm 106J | | | | | | | |
| | | J: Your | | | | | | 12/ | 15 |
| info | ormation. If m | | eded, atta | . If two married people ar ich another sheet to this t n. | | | | | |
| | | ribe Your House | ehold | | | | | | |
| 1. | Is this a joir | | | | | | | | |
| | ■ No. Go to | | in a sonar | ate household? | | | | | |
| | □ 163. D00 | | iii a sepai | ate nousenoid: | | | | | |
| | | | st file Offici | al Form 106J-2, <i>Expenses</i> | for Separate House | <i>hold</i> of Debt | or 2. | | |
| 2. | Do you have | e dependents? | ■ No | | | | | | |
| | Do not list Debtor 2. | ebtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? | |
| | Do not state | | | | | | | □ No | |
| | dependents | names. | | | | | | ☐ Yes | |
| | | | | | | | | □ No □ Yes | |
| | | | | | | | <u> </u> | □ Yes | |
| | | | | | | | | ☐ Yes | |
| | | | | | | | | □ No | |
| | | | | | | | | ☐ Yes | |
| 3. | | penses include | | No | | | | | |
| | | f people other t d your depende | | Yes | | | | | |
| Part | t 2: Estim | ate Your Ongoi | na Month | v Expenses | | | | | |
| Esti exp | imate your ex | cpenses as of y | our bankr | uptcy filing date unless y y is filed. If this is a supp | | | | | ; |
| the | | h assistance an | | government assistance it cluded it on <i>Schedule I:</i> Y | | | Your exp | enses | |
| (011 | ilciai i oi iii i o | ,01., | | | | | | | |
| 4. | | or home owners and any rent for th | | ses for your residence. In or lot. | nclude first mortgage | 4. \$ | | 950.00 | |
| | If not includ | led in line 4: | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. \$ | | 0.00 | |
| | 4b. Prope | rty, homeowner's | s, or renter | 's insurance | | 4b. \$ | | 0.00 | |
| | | | • | upkeep expenses | | 4c. \$ | | 0.00 | |
| E | | owner's associat | | | and a modern to one | 4d. \$ 5. \$ | | 0.00 | |
| IJ. | AUGITIONALI | nortuaue pavmo | ems for VO | our residence , such as ho | me equity loans | ე. ზ | | 0.00 | |

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Document Page 31 of 54

| btor 1 A | lesly A Martinez | Case num | ber (if known) | |
|---------------------|---|----------------|--------------------|---------------------------|
| Utilities | : | | | |
| 6a. El | ectricity, heat, natural gas | 6a. | \$ | 135.00 |
| | ater, sewer, garbage collection | 6b. | \$ | 0.00 |
| | elephone, cell phone, Internet, satellite, and cable services | 6c. | | 102.00 |
| | ther Specify: INTERNET | 6d | | 45.00 |
| | ABLE | | \$ | 40.00 |
| | ADLE nd housekeeping supplies | | · i · | |
| | | 7. | · | 215.00 |
| | re and children's education costs | 8. | \$ | 0.00 |
| | g, laundry, and dry cleaning | 9. | · | 70.00 |
| | al care products and services | 10. | · | 80.00 |
| | and dental expenses | 11. | \$ | 25.00 |
| | ortation. Include gas, maintenance, bus or train fare. | 10 | œ. | 190.00 |
| | nclude car payments. | 12. | · | |
| | nment, clubs, recreation, newspapers, magazines, and books | 13. | · | 0.00 |
| | ble contributions and religious donations | 14. | \$ | 0.00 |
| . Insuran | | | | |
| | nclude insurance deducted from your pay or included in lines 4 or 20. | | • | |
| | fe insurance | 15a. | · | 0.00 |
| | ealth insurance | 15b. | | 0.00 |
| 15c. Ve | ehicle insurance | 15c. | \$ | 0.00 |
| 15d. O | ther insurance. Specify: | 15d. | \$ | 0.00 |
| . Taxes. [| Do not include taxes deducted from your pay or included in lines 4 or 20. | | | |
| Specify: | | 16. | \$ | 0.00 |
| . Installm | ent or lease payments: | | | |
| 17a. C | ar payments for Vehicle 1 | 17a. | \$ | 0.00 |
| 17b. Ca | ar payments for Vehicle 2 | 17b. | \$ | 0.00 |
| 17c. O | ther. Specify: | 17c. | \$ | 0.00 |
| | ther. Specify: | 17d. | \$ | 0.00 |
| | yments of alimony, maintenance, and support that you did not repo | ort as | | |
| | ed from your pay on line 5, Schedule I, Your Income (Official Form 1 | | \$ | 0.00 |
| | ayments you make to support others who do not live with you. | , | \$ | 0.00 |
| Specify: | | 19. | | |
| | eal property expenses not included in lines 4 or 5 of this form or on | Schedule I: Yo | our Income. | |
| | ortgages on other property | 20a. | | 0.00 |
| | eal estate taxes | 20b. | \$ | 0.00 |
| | roperty, homeowner's, or renter's insurance | 20c. | · | 0.00 |
| | aintenance, repair, and upkeep expenses | 20d. | | 0.00 |
| | omeowner's association or condominium dues | 20e. | | 0.00 |
| | | | · · | |
| . Other: S | рреспу. | | +\$ | 0.00 |
| . Calcula | te your monthly expenses | | | |
| | d lines 4 through 21. | | \$ | 1,852.00 |
| | py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106 | SJ-2 | \$ | .,552.56 |
| | | - - | \$ | 4 050 00 |
| 220. A00 | d line 22a and 22b. The result is your monthly expenses. | | Φ | 1,852.00 |
| . Calcula | te your monthly net income. | | | |
| | opy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 1,948.09 |
| | opy your monthly expenses from line 22c above. | 23b. | -\$ | 1,852.00 |
| | | | | .,002.00 |
| 23c. St | ubtract your monthly expenses from your monthly income. | | | |
| | ne result is your <i>monthly net income</i> . | 23c. | \$ | 96.09 |
| For exam modificati | expect an increase or decrease in your expenses within the year aft ple, do you expect to finish paying for your car loan within the year or do you expect to the terms of your mortgage? | | | ase or decrease because o |
| No. | | | | |
| ☐ Yes. | Explain here: | | | |

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Document Page 32 of 54

| Fill in this infor | mation to identify your | | | | |
|---------------------|---|---------------------------|-------------------------------|------------------------------|---|
| | mation to identify your | case: | | | |
| Debtor 1 | Alesly A Martinez | Middle Name | Last Name | | |
| Debtor 2 | 1 list Ivallie | Widdle Name | Last Name | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an amended filing |
| Official Forr | n 106Dec | | | | |
| | - | n Individual | Debtor's Sc | hedules | 12/15 |
| years, or both. 1 | 8 U.S.C. §§ 152, 1341, 1 | | upicy case can result ii | in innes up to \$250,000, or | imprisonment for up to 20 |
| | n Below | one who is NOT an attorn | ev to help vou fill out b | ankruptcy forms? | |
| ■ No | y or agree to pay come | | o, 10 1101p , 00 1111 0 111 1 | | |
| ☐ Yes. I | Name of person | | | | cy Petition Preparer's Notice, Signature (Official Form 119) |
| | alty of perjury, I declare e true and correct. | that I have read the summ | nary and schedules filed | d with this declaration an | d |
| X /s/ Ale | sly A Martinez | | X | | |
| Alesly | A Martinez are of Debtor 1 | | Signature of | Debtor 2 | |
| Date . | June 7, 2017 | | Date | | |

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Document Page 33 of 54

| Fil | I in this inform | ation to identify you | r case. | | | | | | | | | |
|-------------------|--|---|--|---|---|---|--|--|--|--|--|--|
| _ | btor 1 | | | | | | | | | | | |
| | DIOI I | Alesly A Martine | Middle Name | Last Name | | | | | | | | |
| | btor 2 ouse if, filing) | First Name | Middle Name | Last Name | | | | | | | | |
| Un | ited States Ban | kruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | | | | | | | |
| Ca | se number | | | | | | | | | | | |
| | nown) | | | | - | theck if this is an mended filing | | | | | | |
| \sim | ۲: م: ما ت مت | ···· 407 | | | | | | | | | | |
| | fficial For | | Δffairs for Individ | duals Filing for B | ankruntcy | 4/16 | | | | | | |
| | | | | | equally responsible for sup | | | | | | | |
| info | rmation. If mo | | attach a separate sheet to | | additional pages, write you | | | | | | | |
| | <u> </u> | , | | | | | | | | | | |
| | | | rital Status and Where You | I Lived Before | | | | | | | | |
| 1. | What is your | current marital statu | IS? | | | | | | | | | |
| | ☐ Married■ Not marr | ried | | | | | | | | | | |
| 2. | During the la | Ouring the last 3 years, have you lived anywhere other than where you live now? | | | | | | | | | | |
| | ■ No | No | | | | | | | | | | |
| | _ | all of the places you l | <i>1</i> . | | | | | | | | | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there | | | | | | |
| 3. stat | | | | | ity property state or territory ico, Texas, Washington and W | | | | | | | |
| | ■ No | | | | | | | | | | | |
| | ☐ Yes. Mal | ke sure you fill out <i>Scl</i> | nedule H: Your Codebtors (O | fficial Form 106H). | | | | | | | | |
| Pa | rt 2 Explain | n the Sources of You | r Income | | | | | | | | | |
| 4. | Fill in the total | I amount of income yo | u received from all jobs and | ng a business during this yeall businesses, including parter together, list it only once ur | | ndar years? | | | | | | |
| | □ No | | | | | | | | | | | |
| | _ | in the details. | | | | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | | | | |
| | | of current year until I for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$14,462.56 | ☐ Wages, commissions, bonuses, tips | | | | | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | | | | | |

Official Form 107

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Document

Page 34 of 54 Case number (if known) Debtor 1 Alesly A Martinez

| | | | | Debtor 1 | | Debtor 2 | | |
|-----|--|--|---|--|---|---|---|---|
| | | Sources of income Check all that apply. | | | income at apply. | Gross income (before deductions and exclusions) | | |
| | last calen nuary 1 to | dar year: December 3 | | ■ Wages, commissions, conuses, tips | \$36,232.00 | | | |
| | | | | ☐ Operating a business | | ☐ Operating | a business | |
| | | dar year bef December 3 | 21 2015 \ | Wages, commissions, bonuses, tips | \$34,117.00 | D □ Wages, c bonuses, tips | | |
| | | | | ☐ Operating a business | | ☐ Operating | a business | |
| 5. | Include include and other winnings. List each s | come regard public benef If you are fili | less of whether it payments; pe ng a joint case ne gross incom | during this year or the two that income is taxable. Exansions; rental income; inter and you have income that ye from each source separate | amples of other income are est; dividends; money coll ou received together, list | e alimony; child su ected from lawsui t only once under | ts; royalties; ar Debtor 1. | |
| | | | | Debtor 1 | | Debtor 2 | | |
| | | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of Describe bel | | Gross income (before deductions and exclusions) |
| Par | rt 3: List | Certain Pa | yments You M | ade Before You Filed for I | Bankruptcy | | | |
| 6. | □ No. | Neither De individual puring the No. Yes | shor 1 nor Delarimarily for a p 90 days before Go to line 7. List below ear paid that cred not include par o adjustment or pebtor 2 or 90 days before Go to line 7. List below ear include paym | debts primarily consumer btor 2 has primarily consumersonal, family, or household you filed for bankruptcy, disch creditor to whom you pailitor. Do not include payments to an attorney for the n 4/01/19 and every 3 years both have primarily consumers you filed for bankruptcy, disch creditor to whom you paients for domestic support of | d you pay any creditor a to d a total of \$6,425* or more ts for domestic support of his bankruptcy case. Is after that for cases filed of mer debts. d you pay any creditor a to d a total of \$600 or more a | e in one or more poligations, such as on or after the date of \$600 or mound the total amound the total amoun | more? payments and to child support are of adjustmenter? | the total amount you and alimony. Also, do t. |
| | | | | nis bankruptcy case. | | | | |
| | Creditor' | s Name and | Address | Dates of payme | nt Total amount paid | Amount you still owe | | payment for |

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main

Page 35 of 54
Case number (if known) Document Debtor 1 Alesly A Martinez

| 7. | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. | | | | | | | | | |
|-----|--|------------------------------|----------------------|----------------------|----------------------------|------------------------------|--|--|--|--|
| | ☐ Yes. List all payments to an insider. | | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment | | | | |
| 8. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos | | ments or transfer a | any property on a | ccount of a d | ebt that benefited an | | | | |
| | ☐ Yes. List all payments to an insider | | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment litor's name | | | | |
| Pai | t 4: Identify Legal Actions, Repossession | ns. and Foreclosures | | | | | | | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | | | | | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of th | ne case | | | | |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. | | erty repossessed, t | foreclosed, garnis | hed, attached | d, seized, or levied? | | | | |
| | Creditor Name and Address Describe the Property | | | | | Value of the | | | | |
| | | Explain what happened | I | | property | | | | | |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment bed No ☐ Yes. Fill in the details. | | luding a bank or fi | nancial institution | , set off any a | amounts from your | | | | |
| | Creditor Name and Address | Describe the action the | creditor took | Date taken | Date action was Am | | | | | |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a No Yes | | erty in the possess | | | efit of creditors, a | | | | |
| Pai | t 5: List Certain Gifts and Contributions | | | | | | | | | |
| 13. | Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift. | otcy, did you give any gifts | s with a total value | of more than \$60 | 0 per person | ? | | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | | Dates the g | s you gave ifts | Value | | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | | | |

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Document Page 36 of 54 Case number (if known)

| 14. | Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No ■ Yes. Fill in the details for each gift or contribution. | | | | | | | | | | |
|-----|--|---|--|------------------------|---|---------------------------|--|--|--|--|--|
| | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo | total | Describe what you contributed | Dates you contributed | Value | | | | | | |
| Pa | rt 6: List Certain Losses | | | | | | | | | | |
| 15. | Within 1 year before you filed for bankroor gambling? | uptcy o | r since you filed for bankruptcy, did yo | ou lose anyt | thing because of the | t, fire, other disaster | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | | |
| | Describe the property you lost and how the loss occurred | Includ | ribe any insurance coverage for the lo de the amount that insurance has paid. Li ance claims on line 33 of Schedule A/B: H | st pending | Date of your loss | Value of property lost | | | | | |
| Pai | rt 7: List Certain Payments or Transfer | rs | | | | | | | | | |
| 16. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. | | | | | | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not | Description and value of any property transferred | | | Date payment or transfer was made | Amount of payment | | | | | |
| 17. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. | | | | | | | | | | |
| | No | | | | | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | | | | |
| | Person Who Was Paid Address | | Description and value of any prope transferred | erty | Date payment or transfer was made | Amount of payment | | | | | |
| 18. | Within 2 years before you filed for bank transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have all No Yes. Fill in the details. | our busi rs made | ness or financial affairs? as security (such as the granting of a se | | | | | | | | |
| | Person Who Received Transfer Address | Description and value of property transferred | any property or received or debts change | Date transfer was made | | | | | | | |
| | Person's relationship to you | | | paid iii ex | change | | | | | | |
| 19. | Within 10 years before you filed for ban beneficiary? (These are often called asse | | | elf-settled tru | ust or similar device | of which you are a | | | | | |
| | Yes. Fill in the details. | | Description and value of the name | rty transfo | end. | Data Transfer was | | | | | |
| | Name of trust | ne of trust Description and value of the property transferred | | | | Date Transfer was made | | | | | |

Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Case 17-17656 Page 37 of 54 Case number (if known) Document

Debtor 1 Alesly A Martinez

| Pa | rt 8: List of Certain Financial Accounts, Ins | truments, Safe Depos | it Boxes, and Sto | orage Unit | ts | | |
|---|--|---|----------------------------|-----------------------|--|-------|---|
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. | | | | | | |
| | ■ No | , | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account instrument | int or | Date account was closed, sold, moved, or transferred | ı | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had ac Address (Number, State and ZIP Code) | | Describe the contents | | | Do you still have it? |
| 22. | Have you stored property in a storage unit o | r place other than you | r home within 1 | year befo | re you filed for bankrupt | tcy? | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | | Describe the contents | | | Do you still have it? |
| | Do you hold or control any property that sor | | lude any propert | y you bor | rowed from, are storing | for, | or hold in trust |
| | for someone. | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the pro (Number, Street, City, Code) | | Describe | the property | | Value |
| Pa | rt 10: Give Details About Environmental Info | rmation | | | | | |
| For | the purpose of Part 10, the following definition | ons apply: | | | | | |
| | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. | | | | | | |
| Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or to own, operate, or utilize it, including disposal sites. | | | | | utilize it or used | | |
| | Hazardous material means anything an environment, hazardous material, pollutant, contaminant, | | as a hazardous | waste, ha | zardous substance, tox | ic su | ıbstance, |
| Rep | port all notices, releases, and proceedings tha | it you know about, reg | ardless of when | they occu | urred. | | |
| 24. | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental un Address (Number, | | | onmental law, if you it | | Date of notice |

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Page 38 of 54 Document ase number (if known) Debtor 1 Alesly A Martinez 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| /s/ Ale | esly A Martinez | |
|-------------------|------------------------|--|
| Alesly A Martinez | | Signature of Debtor 2 |
| Signat | ture of Debtor 1 | |
| Date | June 7, 2017 | Date |
| Did you | u attach additional pa | ages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| ■ No | | |
| ☐ Yes | | |
| Did you | u pay or agree to pay | someone who is not an attorney to help you fill out bankruptcy forms? |
| ■ No | | |
| ☐ Yes. | Name of Person | . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Official Form 107

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Page 39 of 54
Case number (if known) Document

Debtor 1 Alesly A Martinez

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$150.00 toward the flat fee, leaving a balance due of \$3,850.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date:June_7, 2017 | - 1-Sin to appear in Court to Cojecu. |
|--------------------------------------|---------------------------------------|
| Signed: | |
| /s/ Alesly A Martinez | /s/ Ted A. Smith |
| Alesly A Martinez | Ted A. Smith 6271456 |
| | Attorney for the Debtor(s) |
| Debtor(s) | |
| Do not sign this agreement if the an | nounts are blank. |

Local Bankruptcy Form 23c

Case 17-17656 Doc 1 Filed 06/09/17 Entered 06/09/17 11:37:15 Desc Main Document Page 50 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In re | Alesly A Martinez | | Case No. | | |
|--------|---|---|---|--|---|
| | - | Debtor(s) | Chapter | 13 | - |
| | DISCLOSURE OF COMPEN | NSATION OF ATTO | RNEY FOR DE | CBTOR(S) | |
| С | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(1) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of | g of the petition in bankruptcy | , or agreed to be paid | to me, for services rendered or to | |
| | For legal services, I have agreed to accept | | \$ | 4,000.00 | |
| | Prior to the filing of this statement I have received | | | 150.00 | |
| | Balance Due | | \$ | 3,850.00 | |
| 2. 1 | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. Т | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. I | ■ I have not agreed to share the above-disclosed compe | ensation with any other persor | unless they are mem | pers and associates of my law firm | |
| i | ☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name | | | | |
| 5. 1 | In return for the above-disclosed fee, I have agreed to ren | nder legal service for all aspec | ets of the bankruptcy of | ase, including: | |
| b c | a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed] Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou | ment of affairs and plan whic rs and confirmation hearing, a educe to market value; ex ns as needed; preparation | h may be required; and any adjourned hea cemption planning; | rings thereof; preparation and filing of | |
| 6. E | By agreement with the debtor(s), the above-disclosed fee | does not include the followin | g service: | | |
| | | CERTIFICATION | | | _ |
| | certify that the foregoing is a complete statement of any ankruptcy proceeding. | agreement or arrangement fo | r payment to me for r | epresentation of the debtor(s) in | |
| Jι | une 7, 2017 | /s/ Ted A. Smith | | | |
| De | ate | Ted A. Smith 62 Signature of Attorn Smith Ortiz P.C. 4309 W. Fullerto Chicago, IL 6063 773-384-7400 | ey n Avenue | | |

ted.smith@smithortiz.com

Name of law firm

United States Bankruptcy Court Northern District of Illinois

| In re | Alesly A Martinez | | Case No. | |
|-------|--|---|------------------------|-------------------|
| | | Debtor(s) | Chapter 13 | |
| | VE | RIFICATION OF CREDITOR MA | TRIX | |
| | | Number of C | Creditors: | 22 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of creditor | rs is true and correct | to the best of my |
| Date: | June 7, 2017 | /s/ Alesly A Martinez Alesly A Martinez Signature of Debtor | | |

Ameri Cash 4815 W Irving Park Rd Chicago, IL 60641

AT & T PO Box 8100 Aurora, IL 60507-8100

Capital One Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130

Comenity Bank/Carsons Po Box 182125 Columbus, OH 43218

Comenity Bank/Harlem Furniture Po Box 182125 Columbus, OH 43218

Comenity Bank/nwyrk&co 220 W Schrock Rd Westerville, OH 43081

Comenity Bank/Victoria Secret Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Con Fin Svc 3849 N Cicero Ave Chicago, IL 60641

Famsa Inc 2727 Lyndon B Johnson Fwy Dallas, TX 75234

Mira Med Revenue P.O. Box 77000 Dept. 77304 Detroit, MI 48277 Mira Med Revenue P.O. Box 77000 Dept. 77304 Detroit, MI 48277

National Quik Cash 4820 W Irivng Park Rd Chicago, IL 60641

North Shore Agency 270 Spagnoli Road Suite 110 Melville, NY 11747

OneMain Attn: Bankruptcy 601 Nw 2nd St Evansville, IN 47708

Oportun 1600 Seaport Blvd Ste 250 Redwood City, CA 94063

Opportunity Financia 11 E. Adams Chicago, IL 60603

SEIU 111 E Wacker Drive Chicago, IL 60601

Synchrony Bank Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

Synchrony Bank/ JC Penneys Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

Target C/O Financial & Retail Srvs Mailstopn BT POB 9475 Minneapolis, MN 55440 Turner Acceptance Crp 5900 W Howard St Skokie, IL 60077

Verizon Wireless P.O. Box 25505 Lehigh Valley, PA 18002